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4813-B EISENH ALEXANDRIA,	IOWER AVENUE		Sta add trar	I nereo'y certuit ynat unis ree(s) Transmittal is being acposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (\$71) 273-2885, on the date indicated below.		
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APPLICATION NO.	FILING DATE	FIRST NAMED INVE		:	ATTORNEY DOCKET NO. CONFIRMATION NO.	
09/226,597 TITLE OF INVENTION:	01/07/1999 WEIGHT CONTROL	USING AN ANTI-LIPA:	JULIO PIMENTEL SE ANTIBODY		ANIT0018U-US	9844
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DU	E DATE DUE
nonprovisional	NO	\$1510	\$0	\$0	\$1510	12/01/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS	1		
GABEL, GAILENE		1641	424-130100			
1. Change of correspondence address or indication CFR 1.363.  Change of correspondence address (or Cha Address form PTO/SB/122) attached.  Tee Address' indication (or "Fee Address' PTO/SB/47; Rev 03-02 or more recent) attach Number is required.		nge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 resistered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unle recordation as set forth	ess an assignee is ident i in 37 CFR 3.11. Comp			oatent. If an assigne assignment.		document has been filed for
(A) NAME OF ASSIGNEE ANITOX CORPORATION			(B) RESIDENCE: (CITY and STATE OR COUNTRY)  LAWRENCEVILLE, GEORGIA			
JULIO L PIMEN Please check the appropri	TEL ate assignee category or	categories (will not be p	BUFORD, GEORG rinted on the patent):	Individual 🛂 Co.	rporation or other private g	roup entity 🚨 Government
Advance Order - #  5. Change in Entity Stat	o small entity discount p	d above)	b. Psyment of Fee(s): (Please first reapply any previously paid issue fee shown above)  \[ \begin{align*} \text{check is enclosed.} \\ \end{align*} \] Psyment by credit card. Form PTO-2038 is attached.  \[ \begin{align*} \text{The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to beposit Account Number 5:10-210. (enclose an extra copy of this form).  \[ \begin{align*} b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)/2. \]			
NOTE: The Issue Fee and	Publication Fee (if req		d from anyone other than			the assignee or other party in

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